07-27-06

PTO/SB/21/09-04

Approved for use through 07/31/2006. OMB 0851-0031

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		Application Number	10/678,006							
TRANSMITT	AL	Filing Date	October 1, 2003							
FORM		First Named Inventor	Giovanni COGLITORE							
(to be used for all correspondence after	rinitial filing)	Art Unit	2835							
		Examiner Name	L. Lea-Edmonds							
Total Number of Pages in This Submiss	sion 5	Attorney Docket Numbe	443452000103							
: EN	ICLOSURES	(Check all that appl	у)							
Fee Transmittal Form plus duplicate for fee processing (2 pages)	Drawing(s)	(Check all that appl	After Allowance Communication to TC							
Fee Transmittal Form plus duplicate			After Allowance Communication							
Fee Transmittal Form plus duplicate for fee processing (2 pages)	Drawing(s)		After Allowance Communication to TC Appeal Communication to Board of							

Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address X Other Enclosure(s) (please Identify below): x Extension of Time Request (1 page) Terminal Disclaimer Return Receipt Postcard **Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name MORRISON & FOERSTER LLP (Customer No. 25226) Signature Printed name Rick Shoop Date Reg. No. July 25, 2006 45,763

	ondence is being deposited with the U.S. Postal Service as Express Mail, Ai lail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 223	
Dated: July 25, 2006	Signature:(Megha Aggarwal)	:
	(megra / yggarwar)	

PTO/SB/17 (01-06)

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Fees pursuant to a	ihe Consolidated Appropr	iations Act, 2005 (H.R. 4)	818). 🕌									
FEE TRANSMITTAL For FY 2006				Application Number		10/678,006						
				Filing Date		October 1, 2003						
			_	First Named Inventor		Giovanni COGLITORE						
				Examiner Name		L. Lea-Edmonds						
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2835						
TOTAL AMOU	TOTAL AMOUNT OF PAYMENT (\$) 760.00				No. 4	443452000103						
METHOD OF	METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):												
x Deposit Ac	count Deposit Account N	lumber: <u>03-1952</u> Depo	osit Accou	nt Name:	Morr	ison & Foerst	er LLP					
For the	above-identified depo	sit account, the Dire	ctor is h	ereby authorize	d to: (check	all that apply)						
x CI	harge fee(s) indicated	below		Charge	e fee(s) indi	cated below, ex	cept for th	e filing fee				
	harge any additional fe e(s) under 37 CFR 1.		ent of	x Credit	any overpay	yments						
FEE CALCUI	LATION (All the fee	es below are due	upon	filing or may	be subjec	t to a surcha	rge.)					
1. BASIC FILIN	G, SEARCH, AND EX											
	FIL	ING FEES Small Entity	SEAF	RCH FEES Small Entity	EXAMINA	ATION FEES Small Entity						
Application Ty	ype <u>Fee (\$)</u>		ee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)				
Utility	300	150	500	250	200	100	0.	00				
Design	200	100	100	50	130	65	0.	00				
Plant	200	100	300	150	160	80	0.00					
Reissue	300	150	500	250	600	300	0.00					
Provisional	200	100	0	0	0	0		0.00				
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$)												
Fee Description Each claim over	: r 20 (including Reissı	ies)					50	25				
Each independent claim over 3 (including Reissues)							200	100				
Multiple depend	dent claims						360	180				
Total Claims	Extra Claims	Fee (\$)	Fee Pa	id (\$)	Multiple Dependent Claims							
	· —	25.00 =	0.0				ee Paid (\$	1				
	ber of total claims paid for,	-			180	<u>.00 </u>	0.00	_				
Indep. Claims 7	Extra Claims	Fee (\$) 100.00 =	Fee Pa									
	-7 = 0 ×		0.0									
3. APPLICATIO	·	,										
If the specifica	ation and drawings ex											
	ler 37 CFR 1.52(e)), t				or small ent	ity) for each ac	ditional 50)				
i	action thereof. See 3.					F (A)	F /	Delid (6)				
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
4. OTHER FEE	100 = /50 (round up to a whole number) x 125.00 = 0.00 4. OTHER FEE(S)											
	Specification, \$130	fee (no small entity	discou	int)			1000					
Other (e.g., late filing surcharge): 2401 Notice of appeal 250.00												
2253 Extension for response within third month 510.00												
SUBMITTED BY												
Signature				legistration No. Attorney/Agent)	45,763	Telephone	(650) 813	3-5804				
Name (Print/Type)	Name (Print/Type) Rick Shoop					Date	July 25,	2006				